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Protruding from the front of the slider is a hanger bracket 50 from which the tube is suspended. The bracket has a short horizontal upper leg 52, a long vertical lower leg 54 depending from the forward end of the horizontal leg, and a tube engaging pad 56 at the bottom of the lower leg. The pad has a concave lower surface 58, conforming to the shape of the tube. In the preferred embodiment (FIGS. 1-4), the tube engaging pad has a portion 60 extending into the patient's mouth, acting as a bite block.

In the modified form of the invention illustrated in FIG. 5, the bite block is omitted entirely. And in the embodiment of FIG. 6, which is designed for use with a nasal cannula, it is formed on an obliquely extending element 70. The length of the element 70 makes an angle of about 15° with the vertical, so that it is aligned with the nostrils.

In use, one secures the face piece to the patient's head with the bands mentioned previously, so that its main portion lies between the patient's nose and mouth, and the wings rest against the cheeks. The movable support 32 will probably have already been inserted into the way; if not, the slider may be pushed into the way from the front—it snaps in and then cannot be removed—and adjusted laterally to a desired position. The tube is inserted laterally into the bite block from one side (in the cases of FIG. 4), and the endotracheal (or nasal, in the case of FIG. 6) tube is then secured by wrapping a length of tape around the tube and the pad.

Once set up, the tube holder supports the tube reliably, with a minimum of obstruction around the mouth. While accidental movement is prevented by the barbs, the tube can easily be moved left and right by medical attendants, without disturbing the face piece itself.

The components of the device are preferably injection molded from a polymer, such as a polycarbonate, which is medically acceptable for this use. The choice of particular materials is considered a matter of ordinary skill in the field of medical apparatus design.

As mentioned, the device may be used for holding tubing other than endotracheal tubes, and therefore the claims below are not limited to a particular use.

In this document, terms indicative of orientation (e.g., front, back, vertical, horizontal, etc.) are included to clarify the description; however, such terms are not meant to be legally limiting, since the device will be equally useful in any orientation. The terms used describe the approximate orientation that would result, were the patient sitting or standing at attention.

Since the invention is subject to modifications and variations, it is intended that the foregoing description and the accompanying drawings shall be interpreted as

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illustrative of only one form of the invention, whose scope is to be measured by the following claims.

I claim:

1. A variable position endotracheal tube holder comprising

a face piece having a main portion adapted to be placed between the mouth and nose of the patient, upper and lower flanges protruding forward from the main portion of the face piece, said flanges defining therebetween a way in the front surface of the main portion of the face piece, said way extending lengthwise of the main portion, said flanges further having respective upper and lower lips and a tube support comprising a slider retained by said lips for sliding movement within said way, and a hanger bracket whose upper end is connected to the slider, and whose lower end has a pad for engaging a tube passing into the mouth, whereby the tube can be secured to the tube hanger.

2. The invention of claim 1, wherein both the face piece and the slider are arcuate, so as to conform to the contour of the patient's face.

3. The invention of claim 1, wherein the face piece further comprises a pair of wings, one at either end of the main portion of the face piece, said wings having slots for receiving retaining bands to be passed around the head in order to secure the face piece.

4. The invention of claim 1, wherein no portion of the tube holder, other than said tube hanger, passes in front of the mouth of the patient.

5. The invention of claim 1, wherein said slider has means for latching the slider at one of plural positions along the length of said way.

6. The invention of claim 5, wherein the way has plural detents formed along one edge thereof, and the slider has a pair of feet, biased toward said detents, each foot having a barb adapted to seat in said detents, to prevent unintended movement of the slider.

7. The invention of claim 6, wherein each foot has a broad tab affixed to it and protruding forward from the foot, so that one can easily release the barbs from the detents in order to move the tube hanger laterally.

8. The invention of claim 1, wherein the slider further comprises a hanger bracket extending from a forward surface of the slider, said hanger bracket having a downward depending portion terminating at a pad against which the tube may be secured.

9. The invention of claim 8, further comprising a mouthpiece extending rearward from said pad, said mouthpiece being semi-circular in cross-section so that the tube can be inserted into it from one side.

10. The invention of claim 8, wherein the downward depending leg extends along a line oblique to vertical, so that a nasal cannula can be affixed to it.

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